

Subject: Late quarterly report / forthcoming
From: Joseph Murray (urbanprogresssuperpac@yahoo.com)
To: rad@fecgov.onmicrosoft.com;
Date: Tuesday, November 29, 2016 4:35 PM

RECEIVED
FEC MAIL CENTER
2016 DEC 21 AM 8:48

I live in an isolated rural area in the deep woods (Colleton County, S.C.).

My vehicle has been disabled for close to 2 months.

I have a broken brake fluid line and can't drive the vehicle.

(A person was supposed to repair it for me and the person broke their foot and had surgery and has been unable to repair the vehicle.)

My computer printer has become dysfunctional.

I ordered a new computer printer on-line from Home Shopping Network.

United Parcel Service delivered the new printer yesterday (Monday, November 28).

One hour after UPS delivered the printer our house electricity went out (a power failure in the entire (rural) community) until well after the dinner hour.

I have just installed the printer today and the quarterly report will be mailed to you as soon as I can get a ride to the post office.

(Also, our county (Colleton County, S.C.) is currently under two (2) federal disaster designations

(Massive flood, October 2015) and Hurricane Matthew

(October 2016).

Bridget Murray

Urban Progress PAC (Co0528661)

(October Quarterly Report: 0,000.00)

Walterboro, South Carolina 29488

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2016 DEC 21 AM 8:48
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

URBAN PROGRESS POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

P.O. Box 257



Check if different
than previously
reported. (ACC)

WALTERBORO

SC

029488-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00528661

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on



in the
State of



(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on



in the
State of



5. Covering Period



through



I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

BRIDGET L. MURRAY

Signature of Treasurer

Bridget Murray

Date



NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only

FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

09 / 30 / 2016

To:

10 / 15 / 2016

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

0000

0000

- (b) Cash on Hand at
Beginning of Reporting Period.....

0000

- (c) Total Receipts (from Line 19).....

0000

0000

- (d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

0000

0000

7. Total Disbursements (from Line 31).....

0000

0000

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

0000

0000

9. Debts and Obligations Owed **TO**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0000

10. Debts and Obligations Owed **BY**
the Committee (Itemize all on
Schedule C and/or Schedule D).....

0000



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

09 ' 30 ' 2016

To:

10 ' 15 ' 2016

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

- (a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A).....
(ii) Unitemized.....
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0000

0000

0000

0000

0000

0000

0000

0000

0000

0000

- (b) Political Party Committees.....
(c) Other Political Committees (such as PACs).....
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0000

0000

12. Transfers From Affiliated/Other Party Committees.....

0000

0000

13. All Loans Received.....

0000

0000

14. Loan Repayments Received.....

0000

0000

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0000

0000

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0000

0000

17. Other Federal Receipts (Dividends, Interest, etc.).....

0000

0000

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....

0000

0000

- (b) Levin Funds (from Schedule H5).....

0000

0000

- (c) Total Transfers (add 18(a) and 18(b))..

0000

0000

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0000

0000

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0000

0000

2016-12-31 00:00:00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share

0000

0000

- (ii) Non-Federal Share

0000

0000

- (b) Other Federal Operating Expenditures

0000

0000

- (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))

0000

0000

22. Transfers to Affiliated/Other Party Committees

0000

0000

23. Contributions to Federal Candidates/Committees and Other Political Committees

0000

0000

24. Independent Expenditures (use Schedule E)

0000

0000

25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)

0000

0000

26. Loan Repayments Made

0000

0000

27. Loans Made

0000

0000

28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees

0000

0000

- (b) Political Party Committees

0000

0000

- (c) Other Political Committees (such as PACs)

0000

0000

- (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))

0000

0000

29. Other Disbursements (Including Non-Federal Donations)

0000

0000

30. Federal Election Activity (52 U.S.C. § 30101(20))

- (a) Allocated Federal Election Activity (from Schedule H6)

- (i) Federal Share

0000

0000

- (ii) "Levin" Share

0000

0000

- (b) Federal Election Activity Paid Entirely With Federal Funds

0000

0000

- (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))

0000

0000

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..

0000

0000

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)

0000

0000

0000

0000

0000

0000

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3)	<div>0000</div>	<div>0000</div>
34. Total Contribution Refunds (from Line 28(d))	<div>0000</div>	<div>0000</div>
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	<div>0000</div>	<div>0000</div>
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	<div>0000</div>	<div>0000</div>
37. Offsets to Operating Expenditures (from Line 15, page 3)	<div>0000</div>	<div>0000</div>
38. Net Operating Expenditures (subtract Line 37 from Line 36)	<div>0000</div>	<div>0000</div>

2016-12-21 03:00:12 234

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: (check only one)			PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0000

0000

2016-12-21 00:11:11

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:
 (check only one)

☐ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

PAGE OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

999,999.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

999,999.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

999,999.99

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

999,999.99

999,999.99

2019-12-21 00:11:21

SCHEDULE C (FEC Form 3X)
LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE OF
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election:

☐ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

City

State

ZIP Code

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

% (apr)

☐ Yes

☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

2019-12-21 09:00:00

SCHEDULE C-1 (FEC Form 3X)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

Supplementary for
Information found on
Page ____ of Schedule C

NAME OF COMMITTEE (In Full) URBAN PROGRESS POLITICAL ACTION COMMITTEE			FEC IDENTIFICATION NUMBER C00528661		
LENDING INSTITUTION (LENDER) Full Name			Amount of Loan		Interest Rate (APR)
Mailing Address			Date Incurred or Established		
City	State	Zip Code	Date Due		

A. Has loan been restructured? ☐ No ☐ Yes If yes, date originally incurred

B. If line of credit,
Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?
☐ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
☐ No ☐ Yes If yes, specify:

What is the value of this collateral?
Does the lender have a perfected security interest in it? ☐ No ☐ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? ☐ No ☐ Yes If yes, specify:

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).

Location of account:

Date account established:

Address:

City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER

Typed Name

Signature

DATE

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE

Typed Name

Signature

Title

DATE

Excluding Loans

9
10

URBAN PROGRESS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	


罪 罪 罪

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	




C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

0000



0000



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) URBAN PROGRESS POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C00528661
--	--

Check if ☐ 24-hour report ☐ 48-hour report ☒ New report Amends report filed on ☐ / ☐ / ☐

Full Name of Payee			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination		
Mailing Address				<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>		
City	State	Zip Code		Amount		
Purpose of Expenditure			Category/Type	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>		
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
				<input type="checkbox"/> Other (specify) ▶		

Full Name of Payee			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination		
Mailing Address				<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>		
City	State	Zip Code		Amount		
Purpose of Expenditure			Category/Type	<input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>		
Name of Federal Candidate:			<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought				Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
				<input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures	▶ <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶ <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>
(c) TOTAL Independent Expenditures	▶ <input type="checkbox"/> / <input type="checkbox"/> / <input type="checkbox"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Bridget Murray
 Signature

Date ☐ / ☐ / ☐

2016-12-21 00:00:00

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE OF
FOR LINE 25 OF FORM 3X

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) URBAN PROGRESS POLITICAL ACTION COMMITTEE					
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input type="checkbox"/> NO			Full Name of Subordinate Committee		
If YES, name the designating committee:			Mailing Address		
			City		State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee <input type="checkbox"/> Memo Item				Purpose of Expenditure		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address				Date		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	
City		State		Zip Code			
Name of Federal Candidate Supported		Office Sought:		House Senate Presidential		State: District:	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;"></div>			
Full Name (Last, First, Middle Initial) of Each Payee <input type="checkbox"/> Memo Item				Purpose of Expenditure		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address				Date		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	
City		State		Zip Code			
Name of Federal Candidate Supported		Office Sought:		House Senate Presidential		State: District:	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;"></div>			
Full Name (Last, First, Middle Initial) of Each Payee <input type="checkbox"/> Memo Item				Purpose of Expenditure		<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/Type	
Mailing Address				Date		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	
City		State		Zip Code			
Name of Federal Candidate Supported		Office Sought:		House Senate Presidential		State: District:	
Aggregate General Election Expenditure for this Candidate ▶				<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;"></div>			
SUBTOTAL of Expenditures This Page (optional).....▶				<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;"></div>			
TOTAL This Period (last page this line number only).....▶				<div style="border: 1px solid black; width: 200px; height: 20px; margin: 0 auto;"></div>			

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

PAGE OF

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS:</p> <p><input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS:</p> <p><input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>	<p>NONFEDERAL %</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div> <p>%</p>

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE OF
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

DATE OF RECEIPT

TOTAL AMOUNT TRANSFERRED

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

ii) Generic Voter Drive

iii) Exempt Activities

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

2016-12-21 00:00:00

SCHEDULE H4 (FEC Form 3X)

**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE OF
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)			<input type="checkbox"/> Memo Item	Allocated Activity or Event:	
Mailing Address				<input type="checkbox"/> Administrative	<input type="checkbox"/> Fundraising
City				<input type="checkbox"/> Voter Drive	<input type="checkbox"/> Direct Candidate Support
State				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code				Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
Activity or Event Identifier:					
Category/Type				Date	
FEDERAL SHARE			+	NONFEDERAL SHARE	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
			=	TOTAL AMOUNT	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	

B. Full Name (Last, First, Middle Initial)			<input type="checkbox"/> Memo Item	Allocated Activity or Event:	
Mailing Address				<input type="checkbox"/> Administrative	<input type="checkbox"/> Fundraising
City				<input type="checkbox"/> Voter Drive	<input type="checkbox"/> Direct Candidate Support
State				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code				Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
Activity or Event Identifier:					
Category/Type				Date	
FEDERAL SHARE			+	NONFEDERAL SHARE	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
			=	TOTAL AMOUNT	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	

C. Full Name (Last, First, Middle Initial)			<input type="checkbox"/> Memo Item	Allocated Activity or Event:	
Mailing Address				<input type="checkbox"/> Administrative	<input type="checkbox"/> Fundraising
City				<input type="checkbox"/> Voter Drive	<input type="checkbox"/> Direct Candidate Support
State				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Zip Code				Allocated Activity or Event Year-To-Date	
Purpose of Disbursement:			<div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
Activity or Event Identifier:					
Category/Type				Date	
FEDERAL SHARE			+	NONFEDERAL SHARE	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
			=	TOTAL AMOUNT	
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>				<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(iii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>

2016-12-21 00:00:00

SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF
FOR LINE 18b OF FORM 3X

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

DATE OF RECEIPT

TOTAL AMOUNT TRANSFERRED

MM / DD / YYYY

BREAKDOWN OF THIS TRANSFER

i) Voter Registration

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

ii) Voter ID

Total Amount Transferred for Voter ID

VOTER ID

iii) GOTV

Total Amount Transferred for GOTV

GOTV

iv) Generic Campaign Activity

Total Amount Transferred for Generic Campaign Activity

GENERIC CAMPAIGN ACTIVITY

NAME OF ACCOUNT

DATE OF RECEIPT

TOTAL AMOUNT TRANSFERRED

MM / DD / YYYY

BREAKDOWN OF THIS TRANSFER

i) Voter Registration

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

ii) Voter ID

Total Amount Transferred for Voter ID

VOTER ID

iii) GOTV

Total Amount Transferred for GOTV

GOTV

iv) Generic Campaign Activity

Total Amount Transferred for Generic Campaign Activity

GENERIC CAMPAIGN ACTIVITY

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

-----0000

TOTAL This Period (Voter ID)

-----0000

TOTAL This Period (GOTV).....

-----0000

TOTAL This Period (Generic Campaign Activity).....

-----0000

TOTAL This Period (Total Amount of Transfers Received).....

-----0000

2016-12-21 10:00 AM

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

PAGE	OF
FOR LINE 30a OF FORM 3X	

A. Full Name (Last, First, Middle Initial) / Full Organization Name			<input type="checkbox"/> Memo Item	Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Mailing Address				Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
City	State	Zip Code	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Category/ Type	Date <div style="border: 1px solid black; padding: 2px;">MM</div> / <div style="border: 1px solid black; padding: 2px;">DD</div> / <div style="border: 1px solid black; padding: 2px;">YYYY</div>		
Purpose of Disbursement						

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

B. Full Name (Last, First, Middle Initial) / Full Organization Name			<input type="checkbox"/> Memo Item	Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Mailing Address				Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
City	State	Zip Code	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Category/ Type	Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M</div> <div style="border: 1px solid black; padding: 2px;">D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y</div> </div>		
Purpose of Disbursement						

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name			<input type="checkbox"/> Memo Item	Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign		
Mailing Address				Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
City	State	Zip Code	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> Category/ Type	Date <div style="border: 1px solid black; padding: 2px;">M M</div> / <div style="border: 1px solid black; padding: 2px;">D D</div> / <div style="border: 1px solid black; padding: 2px;"> <div style="border-bottom: 1px solid black; width: 100%; height: 15px;"></div> </div>		
Purpose of Disbursement						

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

FEDERAL SHARE

LEVIN SHARE

TOTAL AMOUNT

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

TOTAL This Period for the Levin Share

0000

SCHEDULE L (FEC Form 3X)
AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)	0000	0000
(b) Unitemized	0000	0000
(c) Total	0000	0000
2. OTHER RECEIPTS	0000	0000
3. TOTAL RECEIPTS (Add Lines 1c and 2)	0000	0000
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration	0000	0000
(b) Voter ID	0000	0000
(c) GOTV	0000	0000
(d) Generic Campaign	0000	0000
(e) Total	0000	0000
5. OTHER DISBURSEMENTS	0000	0000
6. TOTAL DISBURSEMENTS (Add Lines 4e and 5)	0000	0000
7. BEGINNING CASH ON HAND (for Column B, use cash as of January 1st)	0000	0000
8. RECEIPTS (from Line 3)	0000	0000
9. SUBTOTAL (Add Lines 7 and 8)	0000	0000
10. DISBURSEMENTS (From Line 6)	0000	0000
11. ENDING CASH ON HAND (Subtract Line 10 From Line 9)	0000	0000

2

FEC Schedule L-A (Form 3X) Rev. 06/2016

SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS

Use separate schedule(s)
for each category of the
Aggregation Page

FOR LINE NUMBER: PAGE OF
 (check only one) ☐ 4a ☐ 4c ☐ 5
☐ 4b ☐ 4d

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

URBAN PROGRESS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) / Full Organization Name

☐ Memo Item

A.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name

☐ Memo Item

B.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name

☐ Memo Item

C.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name

☐ Memo Item

D.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Full Name (Last, First, Middle Initial) / Full Organization Name

☐ Memo Item

E.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2016-12-21-00127270

SOLD TO:

SHIPPED TO:

ORDER DATE:

MURRAY BRIGET
496 BISH LN
WALTERBORO SC 29488

MURRAY BRIGET
496 BISH LN
WALTERBORO SC 29488

2016/11/17

CUSTOMER #: 831538596

 It's fun here.

ORDER #	QTY	ITEM	DESCRIPTION	ITEM PRICE	CREDIT	S&H	TAX	TOTAL	PAID BY	RETURN CODE
1372526344	1	521372	HP ENVY 5644 ALL IN ONE PRINTER	\$59.95	\$0.00	\$0.0	\$4.8	\$64.75	CC	

NAE-BD-ENVY5644-H



0182867642

RETURN ON YOUR OWN

ORDER #	ITEM	DESCRIPTION	TOTAL
1372526344	521372	HP ENVY 5644 ALL IN ONE PRINTER	\$64.75

SHIP MURRAY BRIGET
FROM: 496 BISH LN
WALTERBORO SC 29488

SHIP CM22 RMA SHIPPING
TO: 15065 FLIGHT AVE, DOCK#N49
CHINO CA 91710

Print: 2016/11/18 PO: 2016/11/17 PO#: 1372526344

SHIP HSN
FROM: 15065 FLIGHT AVE, DOCK#S46
CHINO CA 91710

20 LBS
1 OF 1



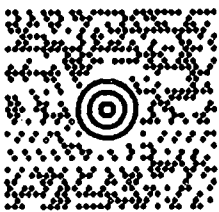
1372526344



0182867642

SHIP MURRAY BRIGET
TO: 496 BISH LN

WALTERBORO SC 29488



SC 294 1-02



UPS GROUND

TRACKING#: 1Z 202 807 03 1870 1863



BILLING: P/P

ORDER# 1372526344

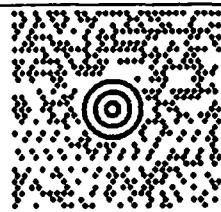
MURRAY BRIGET
496 BISH LN
WALTERBORO SC 29488

20LBS 1 OF 1

RS

SHIP TO

CM22 RMA SHIPPING
15065 FLIGHT AVE,
DOCK#N49
CHINO CA 91710



CA 916 9-01



UPS GROUND

TRACKING#: 1Z V32 W91 90 0491 4937



BILLING: P/P

DESC: 2016/11/18 PO: 2016/11/17 PO#: 1372526344

RETURN SERVICE

69.5A 10/2015

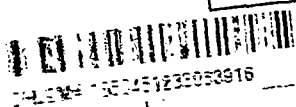
SHIPPING

CUSTOMER EASY RETURNS LABEL

PS LIGHTWEIGHT
Time Sensitive Material

CR-RT

B015



Address Service Requested

HP Instant Ink
2520 Georgetown Road
Walterboro, SC 29488



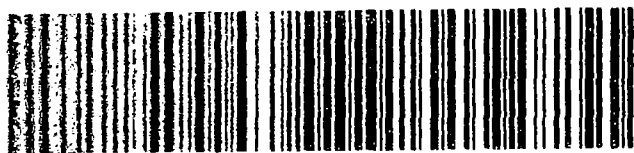
2dfc67167

JOSEPH MURRAY

PO Box 1483

Walterboro, SC, 29488 - 0015

USPS TRACKING # eVS



9274 8999 9915 4946 4442 04

Your new ink has arrived!

Enclosed are your special HP Instant Ink cartridges. When you install one of these cartridges in your printer, your service and billing cycle will begin.



How are these cartridges special?

These cartridges have more ink than XL HP ink cartridges. Since they have more ink, you won't have to replace them as often and while you won't receive a new cartridge every month, you will be saving money with every page you print.

They may be bigger in size than your current cartridges, but they were designed to fit in your printer.



Stay connected

Keep your printer connected to the Internet so we can continue to send cartridges. **Shipments will not be sent monthly, but will be ordered by your printer before you need them.**



Access your account online any time

You can check your page count, update your personal information or change your plan on your HP Instant Ink account page. Simply sign in with your HP Connected user name and password.

U.S.A. customers: hpinstantink.com

Canada customers: hpinstantink.ca

HP Instant Ink cartridges can only be used in your enrolled printer.



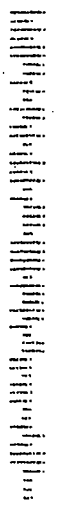
We'll know when to send more ink

Your printer checks the ink levels and lets us know when to send more.

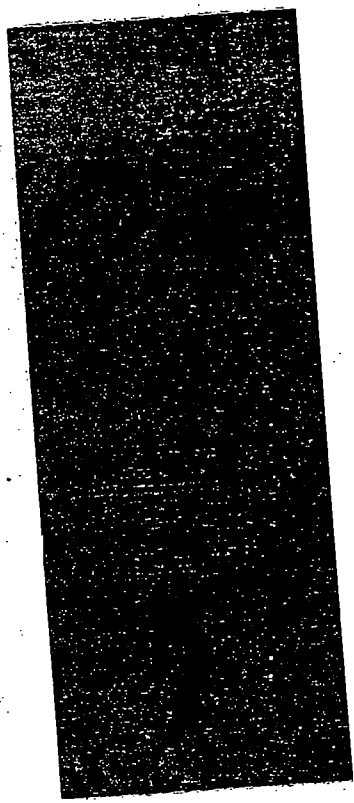
Receive a period of service
Simply return used cartridges in the
enclosed postage-paid package.

HP Instant Ink
Ink replacement service

20161221030012723



UNITED STATES POSTAL SERVICE
P.O. Box 257
Walterboro, SC 29488




Federal Election Commission
999 E Street, NW
Washington, DC 20463

RECEIVED
FEC MAIL CENTER
2016 DEC 21 AM 8:48

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 12/14/16 Date of Receipt 12/21/16
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER
(3/2015)

12/21/16
DATE PREPARED

2016-12-21-03:00:27-4